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Naval Service Medical News (NSMN) (96-017) 2 May 1996

HEADLINES AND GENERAL INTEREST STORIES THIS WEEK:

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- 3. HEADLINE: NAVY HEALTH PROMOTION IN LONDON
  NMCL LONDON (NSMN) -- To coin a popular basketball axiom,
  the staff at the Naval Medical Clinic, London is employing the
  Proverbial "full court press" in an effort to bring health
  promotion to the deckplates for all eligible beneficiaries in the
  greater London area. In addition to area-wide health fairs and
  the development of a comprehensive health promotion program at
  Naval Medical Clinic, London, both of which have met with
  tremendous success, the center has expanded its health promotion
  program to the London headquarters of the Commander in Chief,
  U.S. Naval Forces Europe (CINCUSNAVEUR).

Until recently, CINCUSNAVEUR in London had limited medical services available at the Navy building at 7 North Audley Street in the shape of an active duty sick-call. The newly 'christened' North Audley Health Center now boasts a wider range of primary care services, a prescription refill & pick-up program, as well as a broad based health and wellness program. Finally, the North Audley Health Center has extended its hours of operation to further meet the needs of its beneficiary population, that being active duty members and other employees who are either military retirees or military family members.

By taking health care to the deckplate, the North Audley Health Center will serve as the vehicle for helping to keep Sailors and Marines in the workplace. Sounds like another example of Navy Medicine demonstrating its commitment to improving access and delivering the highest quality of medical care to its customers. Story by LT Hugh J. Cox, U. S. Naval Medical Clinic, London U.K.

#### HEADLINE: USUHS STUDENT HONORED FOR HEROISM

USUHS Bethesda, MD (NSMN) -- Navy Secretary John Dalton recently honored Ensign Michail Charissis, USN, with the NavyMarine Corps Medal for his heroism following the crash of a Maryland Rail Commuter and an Amtrak train on February 16. Charissis is a second year medical student at the Uniformed Services University of the Health Services.

Charissis, 23, a passenger on the Maryland Rail Commuter that collided with the Amtrak train, had the opportunity to escape from the car in which he rode to immediate safety, but instead he returned to the front of the second car to assist a seriously injured passenger. With great effort, Charissis managed to get the train's emergency window open and get the other passenger to rescuers on the ground. He then joined in the process of providing aid and comfort to others. Only after the other injured passengers were cared for, Charissis, remembering a dinner engagement, left the scene with little notice.

The Navy-Marine Corps Medal is one of the Department of the Navy's highest non-combat medals that can be awarded to an individual for an act of heroism involving lifesaving, or attempted lifesaving, while placing their life at risk.

-USN-

#### HEADLINE: COMPUTER THEFT ALERT AT AIRPORTS

FAA Washington (NSMN) -- Please distribute this warning to anyone you know who travels with a laptop computer.

The FAA recently learned of a hustle that's being employed at airports all across the country to steal laptop computers. It involves two persons who look for a victim carrying a laptop and approaching a metal detector. They position themselves in front of the unsuspecting passenger. They stall until the mark puts the laptop computer on the conveyor belt. Then the first subject moves through the metal detector easily. The second subject sets off the detector and begins a slow process of emptying pockets, removing jewelry, etc. While this is happening, the first subject takes the laptop as soon as it appears on the conveyor belt and moves away quickly. When the passenger finally gets through the metal detector, the laptop is gone. The subject that picks it up heads into the gate area and disappears

among the crowd. Sometimes a third subject will take a hand-off from the first subject and the computer is out of the restricted area before the mark even knows that it is gone.

This is becoming a widely practiced problem and is happening at airports everywhere. When traveling with a laptop computer, try to avoid lines to enter a metal detector when possible. When you can't do that, delay putting your luggage and laptop on the conveyor belt until you are sure that you will be the next person through the metal detector. As you move through the metal detector, keep you eyes on the conveyor belt and watch for your

luggage and laptop to come through as well as watching for what those in front of you are picking up.

Story by Captain Terry Bowman, Chief, Technology Integration Secretary of the Air Force.

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HEADLINE: PENSACOLA AMONG SITES FOR TRICARE 'WEB' DEVELOPMENT

NAVHOSP PENSACOLA, FL (NSMN) -- Naval Hospital Pensacola was among 10 Navy sites selected throughout the country to participate in the implementation and development of World Wide Web (WWW) services to support TRICARE, the Department of Defense's new managed-care program.

LT Jim Martin, head of the hospital's Management Information Department, will lead the local team -- which includes Jim Aldridge, Randy Morris, Gary Bamonte and Rod Duren. The team will focus efforts to "improve the communication and exchange of information between sites and to promote maximum utilization of available technology," said LT Jim Martin.

The other nine sites selected for the Office of Assistant Secretary of Defense (Health Affairs) initiative include: Bureau of Medicine and Surgery (BUMED)headquarters in Washington, DC; Naval Medical Information Management Center (NMIMC) Bethesda, MD; NMIMC Detachments at Norfolk and San Diego; TRICARE Region 9 Lead Agent, Naval Medical Center San Diego; TRICARE Region 2 Lead Agent, Naval Medical Center Portsmouth, VA; Naval Hospitals Great Lakes, IL; Bremerton, WA; and Groton, CT.

"We have a fine team of experts working on this initiative and I expect great things to come out of it such as improving communication and the exchange of information among all TRICARE sites," said LT Martin.

Naval Hospital Pensacola has received numerous accolades for the development of its homepage on the World Wide Web. The hospital's homepage carries a wide variety of information regarding the facility, its seven Branch Medical Clinics, links to a myriad of medical/health related topics and Gulf Coast area information. The address for the homepage site is (http://www.nh\_pens.med.navy.mil).

Story by Mr. Rod Duren, Naval Hospital Pensacola

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# HEADLINE: NEW AIDS/HIV POSITIVE MEDICATION APPROVED

BUMED WASHINGTON (NSMN)-- Crixivan (indinavir sulfate), medication that prevents the assembly of new viral particles, was recently approved by the FDA for treatment of HIV infection. This medication was approved 6 months sooner than the manufacturer (Merck) had anticipated. As a result, the manufacturer will have a limited supply of this medication available until full production begins this October. To assure that any patient placed on this therapy will have an uninterrupted supply, Merck will be tracking how many patients have begun this therapy.

Working together with DOD Medical Departments, Merck has set aside enough Crixivan for 600 DOD beneficiaries (200

Navy/USMC, 200 Army and 200 USAF). It is expected that the majority of Navy patients will receive this medication from NNMC Bethesda, NMC Portsmouth or NMC San Diego. These facilities will be able to order this medication directly from Merck's Federal Health Care Affairs Department. Also, pharmacies at these MTFs will FAX to Merck the number of current patients, new patients and patients who have discontinued therapy weekly to assist Merck in tracking total number of patients utilizing Crixivan.

This situation is a temporary shortage which is expected to be resolved by fall. At that time, the reporting requirements and distribution restrictions will no longer be required. For more information the NAVMEDLOGCOM POC is LT A. M. Capano at (301) 619-3058, DSN 343-3058.

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HEADLINE: NEW "SMART" TECHNOLOGY PROPOSED

BUMED WASHINGTON (NSMN) -- An innovative approach using a creative application of the Multi-Technology Automated Reader Card (MARC) is hoped to enhance patient care in the future by interfacing with the Composite Health Care System (CHCS). Instead of carrying your meal card, library card, weapons card, and medical card in your wallet the MARC is projected to replace several single use cards with one multi-use smart card. Still on the drawing board, the MARC may be used to store, update, and transfer patient information along with other information. The current MARC prototype is capable of storing between 2K to 8K on a computer chip that is read by inserting it into a card reader.

The MARC prototype is a credit card-sized, plastic card that has the service member's photo, name, rank, service, status, date of birth, and blood type printed on the front. In addition, the card has a bar code with the service member's social security number, a magnetic stripe, and a dime-size gold colored computer chip. The card currently being evaluated is capable of storing basic patient information such as blood type, allergies, medical problems, and medications.

Bringing combat medicine into the 21st century the MARC is proposed to replace the field medical card or DD form 1380 one day. A little bigger than an index card, the cardboard DD Form 1380 is attached to the injured by a corpsmen. Often the 1380 was lost, mud covered, or illegible.

Envision how it would work...using a small hand held computer on the battlefield to record a soldier's injuries on the MARC. When the patient arrives at the Battalion Aid Station the card may be read and vital signs, diagnosis, and treatment may be recorded. After the patient is transported to a hospital or clinic the MARC card may be downloaded using CHCS where is becomes part of the hospital record.

In addition to medical applications, the MARC is also being used for readiness/deployability manifesting, food service, training and personnel accountability applications.

Story by Ms. Ann Kirby, Bureau of Medicine and Surgery

WASHINGTON (NWSA) -- After evaluating more than 18,000 Gulf War veterans who reported illnesses following service in the Middle East, the Pentagon said there's still no evidence of a single cause.

"When you send young people into an extremely stressful and dangerous environment, some will come home with physical and psychological ailments," said Dr. Stephen Joseph, Assistant Secretary of Defense for Health Affairs. "We've seen a complex mosaic of diseases and conditions, but not apparent is a unique, mysterious, overriding cause."

Joseph updated members of the media on the Comprehensive Clinical Evaluation Program, launched by DOD and the Department of Veterans Affairs in 1994. He said more than 21,000 veterans registered in the program and applied for examinations. Most commonly, they reported joint pain, fatigue, headaches and memory loss, and other symptoms that cannot be specifically attributed to service in the Persian Gulf. In addition, some veterans and their family members reported reproductive problems.

"We will do additional studies of reproductive risks from environmental exposures," Joseph said, but "all research to date has found no evidence of increased reproductive problems for Gulf War veteran families."

The vast majority of evaluation program participants -- active-duty service members or their families -- haven't missed much work because of their illnesses. "Severe disability is not a common feature," Joseph said.

By Mr. Douglas J. Gillert, American Forces Press Service
-USN-

### HEADLINE: FRENCH SAILOR TREATED AT NAVAL HOSPITAL GUAM

NAVHOSP GUAM (NSMN) -- Imagine sailing on a ship in the middle of the Pacific, and suffering a serious injury. You need surgery immediately. You learn you're being taken to a military hospital on foreign soil.

Emmanuel Houssard, the chief boatswain onboard the New Caledonia-based French Frigate Nivose, experienced these feelings first-hand. The 32-year-old sailor ruptured his achilles tendon on his left leg as he passed through an automatically-closing door on his ship. He slipped, and the door slammed shut on his ankle, cutting into his leg and completely severing the heel cord. The doctor on the ship, without specialized training, the proper equipment or a steady, non-rocking operating room, recommended that Houssard receive immediate medical attention at the nearest medical facility. The ship, enroute to Vladivostok, Russia for a port visit, diverted to Guam so the 16-year French military veteran, roughly equivalent in rank to a U.S. Navy senior chief, could be treated.

Army Capt. Nathaniel Berg, a radiologist at Naval Hospital, help put Houssard's concerns at ease.

Houssard, in broken English and through Berg's interpretation,

says he expected good things from an American military hospital. "In France, when we talk about the U.S. military," he explains, "we think that it's better. You have good hospitals and of course, good doctors. It was the best situation to be in, under the circumstances."

On March 28, Houssard traveled back to his ship. Looking back, Berg says "I'm proud of the fact that a service member in need would turn to us for the highest quality of care. He thought he was going to get great care and he got it." by JO2 Brian Naranjo, ComNavMarianas Public Affairs

-USN-

HEADLINE: NAVY RESEARCH LAB ACCREDITED FOR HUMANE ANIMAL CARE

NAMRU-3, CAIRO (NSMN) -- Naval Medical Research Unit Number 3, in Cairo, Egypt, recently received accreditation from the American Association for the Accreditation of Laboratory Animal Care (AAALAC). AAALAC accreditation is widely accepted as a demonstration that the laboratory's animal program has achieved a high level of excellence and provides humane animal care. This voluntary process is based on an extensive self-evaluation and peer review by veterinarians and researchers experienced in laboratory animal management issues. Accredited programs conform with the guide for the care and use of laboratory animals and exceed the minimum required by law. Accreditation assures the animal care and use program provides a sound, ethical approach to research, teaching, and testing involving all animals.

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HEADLINE: SAFETY ALERT ISSUED FOR PLAYSKOOL MOON BOUNCER

WASHINGTON (NWSA) -- The U.S. Consumer Product Safety Commission has issued a safety alert for the Playskool Durasport Moon Bouncer. If the Moon Bouncer is not correctly inflated, is overinflated or is used on hard surfaces, children can be injured if they fall or bounce out of the toy. Playskool has received 22 reports of children falling or bouncing out of the Moon Bouncer, including 10 injuries, four of them fractures. Playskool of Pawtucket, RI, is offering a free set of three gauges to help consumers properly inflate approximately 142,000 Durasport Moon Bouncers the company has already sold to consumers.

Consumers can receive the free inflation gauges and detailed inflation instructions by calling Playskool at 1800-683-5847, or by writing to Moon Bouncer, P.O. Box 5659, Pawtucket, RI 02862. The Moon Bouncer with inflation gauges is currently available at Navy Exchanges.

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HEADLINE: TRICARE QUESTIONS AND ANSWERS

BUMED WASHINGTON (NSMN) -- This week's TRICARE Questions and Answers are:

- Q1. What happens if my family is enrolled in TRICARE Prime, we're traveling out of the area, and a family member needs to see a doctor?
- Al. You will receive a card when you enroll in Prime which should be carried with you at all times. If you or a family member need to seek civilian medical care while traveling out of the area, you must first call the 1-800 number listed on the card to receive authorization. If you don't obtain authorization, you will be charged under "point of service" rules: 50% of the cost, after a \$300/\$600 (individual/family) deductible. If it is a true emergency (e.g., threat to life, limb, or sight), preauthorization is not required but you should contact your Primary Care Manager as soon as possible.
- Q2. If I'm enrolled in TRICARE Prime and then move to another region, will my TRICARE coverage be the same in that area?
- A2. TRICARE Prime benefits or "medical coverage" will be the same wherever Prime is offered. How you access medical care may be different depending on the local medical treatment facility. For example, you cannot be guaranteed a military Primary Care Manager even if you had one previously. Also, there will likely be different telephone numbers, appointment systems, etc. You need to be aware that TRICARE Prime will not be available in all areas of the country.

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HEADLINE: HEALTHWATCH: PUTTING YOUR BEST FOOT FORWARD NAVHOSP PENSACOLA, FL (NSMN) -- Now that the weather is beginning to lend itself to outdoor activities, and this month is National Foot Heatlh Month, our feet will be called upon to meet the demands of increased use. For those individuals who will be pounding the running trails, care must be taken to prevent ankle sprains/strains, stress fractures, shin splints, and blisters. To prevent some of these conditions it is recommended that:

\* Proper shoe gear be used always (rigged shoe counter, stable heel, and flexible across the forefoot;

- \* Adequate stretching is done;
- \* Familiarize yourself with the running terrain before actually running. Athletes are not the only ones who can be subject to foot ailments. Thousands of individuals suffer from plantar warts, corns, calluses, fungal nails, ingrown nails, athletes foot, bunions, and hammertoes. Those problems can at times be agonizingly painful and patients must be aware that there are many treatments available, both conservation and surgical. Also, patients that have been diagnosed with diabetes have their own set of podiatric conditions which must be taken into account. Peripheral vascular disease and neuropathy are often conditions which manifest themselves in the feet as a result of having diabetes. Those conditions in turn can lead to ulcerations, poor wound healing, cramps in the back of the leg or increased risk of infection.

It is imperative that diabetics seek professional help and be treated for these problems because they can lead to serious

consequences. It is recommended that diabetic patients do the following:

- \* Check your feet daily;
- \* Examine all shoegear for debris before putting them on;
- \* Avoid soaking feet in hot or cold water;
- \* Avoid shaving corns and calluses with sharp instruments -- seek professional help;
- \* Use cotton socks -- they have better absorption;
- \* Dry feet entirely after soaking. Use a good antifungal foot powder, and seek professional help when needed.

Ensuring foot health requires that a team approach

exist between the patient and their podiatrist. In addition, the podiatrist and patient must work closely with other health care providers and their physician so as to achieve total well being for the patient's care.

Podiatrists can assist with providing care to all age groups; infants, children, adults, and the elderly. Podiatric care can range from diabetic foot care, sports medicine and surgical management of major foot deformities.

If you think of the average person walking several miles during the course of the day (8,000 steps), it is easy to see how often feet are neglected until a problem arises.

National Foot Health Month's aim is to remind us that we all rely on our feet for many things. With this in mind, we all can put our best foot forward.

Story by LT Alberto Rullan, Podiatrist, Naval Hospital Pensacola
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- 4. Feedback on this issue, inputs for the next issue, questions about distribution and suggestions for improving Naval Service Medical News are invited. Help us make NSMN better. Contact LT Edie Rosenthal, BUMED Public Affairs Office:
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